

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

RESTORE AMERICA'S VOICE PAC

ADDRESS (number and street)

4850 WRIGHT ROAD SUITE 168

☐ Check if different than previously reported. (ACC)

STAFFORD

TX

77477

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00489807

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
01 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
03 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Maureen E Otis

Signature of Treasurer

Maureen E Otis

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
04 10 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

RESTORE AMERICA'S VOICE PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 01 / 01 / 2015 To: M M / D D / Y Y Y Y Y 03 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2015		<span style="border: 1px solid black; padding: 2px;">2230.11</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">2230.11</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">41952.10</span>	<span style="border: 1px solid black; padding: 2px;">41952.10</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">44182.21</span>	<span style="border: 1px solid black; padding: 2px;">44182.21</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">35552.17</span>	<span style="border: 1px solid black; padding: 2px;">35552.17</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">8630.04</span>	<span style="border: 1px solid black; padding: 2px;">8630.04</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">12254.41</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

RESTORE AMERICA'S VOICE PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 01 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y  
 03 / 31 / 2015
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

300.00

300.00

(ii) Unitemized .....

41652.10

41652.10

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

41952.10

41952.10

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

41952.10

41952.10

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

41952.10

41952.10

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

41952.10

41952.10

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	35552.17	35552.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	35552.17	35552.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	35552.17	35552.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35552.17	35552.17

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	41952.10	41952.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	41952.10	41952.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	35552.17	35552.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	35552.17	35552.17

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

RESTORE AMERICA'S VOICE PAC

Full Name (Last, First, Middle Initial)

A. Kenneth Crimm

Mailing Address 19016 NE 178th St

City

Brush Prairie

State

WA

Zip Code

98606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2015

☐

Primary

☐

General

☒

Other (specify) ▼

Other

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	5

Transaction ID : SA11AI.357860

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

300.00

TOTAL This Period (last page this line number only)..... ►

300.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 17

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**RESTORE AMERICA'S VOICE PAC**

Full Name (Last, First, Middle Initial)

**A. Capital One Bank**

Mailing Address 5718 Westheimer

City Houston      State TX      Zip Code 77057

Purpose of Disbursement  
Merchant Processing Fees

001

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01      23      2015
**Transaction ID : SB21B.358042**

Amount of Each Disbursement this Period

134.21

Full Name (Last, First, Middle Initial)

**B. Capital One Bank**

Mailing Address 5718 Westheimer

City Houston      State TX      Zip Code 77057

Purpose of Disbursement  
Merchant Processing Fees

001

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      02      2015
**Transaction ID : SB21B.358029**

Amount of Each Disbursement this Period

29.95

Full Name (Last, First, Middle Initial)

**C. Capital One Bank**

Mailing Address 5718 Westheimer

City Houston      State TX      Zip Code 77057

Purpose of Disbursement  
Merchant Processing Fees

001

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      02      2015
**Transaction ID : SB21B.358032**

Amount of Each Disbursement this Period

7.95

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

172.11



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**RESTORE AMERICA'S VOICE PAC**

Full Name (Last, First, Middle Initial)

**A. Capital One Bank**

Mailing Address 5718 Westheimer

City	State	Zip Code
Houston	TX	77057

Purpose of Disbursement  
Merchant Processing Fees

001

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2015

**Transaction ID : SB21B.358036**

Amount of Each Disbursement this Period

25.65
-------

Full Name (Last, First, Middle Initial)

**B. Capital One Bank**

Mailing Address 5718 Westheimer

City	State	Zip Code
Houston	TX	77057

Purpose of Disbursement  
Merchant Processing Fees

001

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2015

**Transaction ID : SB21B.358037**

Amount of Each Disbursement this Period

60.65
-------

Full Name (Last, First, Middle Initial)

**C. Capital One Bank**

Mailing Address 5718 Westheimer

City	State	Zip Code
Houston	TX	77057

Purpose of Disbursement  
Merchant Processing Fees

001

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2015

**Transaction ID : SB21B.358043**

Amount of Each Disbursement this Period

389.95
--------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

476.25



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**RESTORE AMERICA'S VOICE PAC**

Full Name (Last, First, Middle Initial)

**A. Capital One Bank**

Mailing Address 5718 Westheimer

City	State	Zip Code
Houston	TX	77057

Purpose of Disbursement  
Merchant Processing Fees

001

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2015

**Transaction ID : SB21B.358038**

Amount of Each Disbursement this Period

27.50
-------

Full Name (Last, First, Middle Initial)

**B. Capital One Bank**

Mailing Address 5718 Westheimer

City	State	Zip Code
Houston	TX	77057

Purpose of Disbursement  
Merchant Processing Fees

001

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2015

**Transaction ID : SB21B.358048**

Amount of Each Disbursement this Period

374.74
--------

Full Name (Last, First, Middle Initial)

**C. Capital One Bank**

Mailing Address 5718 Westheimer

City	State	Zip Code
Houston	TX	77057

Purpose of Disbursement  
Merchant Processing Fees

001

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2015

**Transaction ID : SB21B.358039**

Amount of Each Disbursement this Period

59.95
-------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

462.19

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**RESTORE AMERICA'S VOICE PAC**

Full Name (Last, First, Middle Initial)

**A. Capital One Bank**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2015

Mailing Address 5718 Westheimer

City	State	Zip Code
Houston	TX	77057

**Transaction ID : SB21B.358049**Purpose of Disbursement  
Merchant Processing Fees

001

Amount of Each Disbursement this Period

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type

196.08

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Delaware Secretary of State**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2015

Mailing Address 401 Federal Street Ste 3

City	State	Zip Code
Dover	DE	19901

**Transaction ID : SB21B.358027**Purpose of Disbursement  
State Registration

001

Amount of Each Disbursement this Period

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type

225.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Jaffe Raitt Heuer & Weiss PC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		16		2015

Mailing Address 500 Griswald Ste 2400

City	State	Zip Code
Detroit	MI	48226

**Transaction ID : SB21B.358024**Purpose of Disbursement  
Legal Fees

001

Amount of Each Disbursement this Period

Candidate Name

**RESTORE AMERICA'S VOICE PAC**Category/  
Type

15000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15421.08

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**RESTORE AMERICA'S VOICE PAC**

Full Name (Last, First, Middle Initial)

**A. Restore America's Voice Management, LLC**

Mailing Address 71 McMurray Road Suite 104

City	State	Zip Code
Pittsburgh	PA	15241

Purpose of Disbursement  
Debt Payment Management

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		11		2015

**Transaction ID : SB21B.358046**

Amount of Each Disbursement this Period

7000.00
---------

Full Name (Last, First, Middle Initial)

**B. Restore America's Voice Management, LLC**

Mailing Address 71 McMurray Road Suite 104

City	State	Zip Code
Pittsburgh	PA	15241

Purpose of Disbursement  
Debt Payment Management

Candidate Name

**RESTORE AMERICA'S VOICE PAC**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2015

**Transaction ID : SB21B.358025**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Strategic Fundraising**

Mailing Address 7800 3rd Street N Ste 900

City	State	Zip Code
St Paul	MN	55128

Purpose of Disbursement  
Telemarketing Fundraiser

Candidate Name

**RESTORE AMERICA'S VOICE PAC**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2015

**Transaction ID : SB21B.358052**

Amount of Each Disbursement this Period

5118.80
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14118.80
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: 97 'A -G7 9 @ @ 5 B9 CI G 'H9 LH 'F9 @ 5 H98 'HC '5 'F9 DCFH ZG7 <98 I @ 'CF 'H9 A -N5 HCB  
.

Form/Schedule: SB21B

Transaction ID : SB21B.358052

This expenditure was made for promotion of the Restore America's Voice PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.

Form/Schedule:

Transaction ID:

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

RESTORE AMERICA'S VOICE PAC

003

90.00

RESTORE AMERICA'S VOICE PAC

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

MM / DD / YYYY

003

1700.00

RESTORE AMERICA'S VOICE PAC

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

1790.00

35401.99

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: SB21B

Transaction ID : SB21B.358055

This expenditure was made for promotion of the Restore America's Voice PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.

Form/Schedule: SB21B

Transaction ID: SB21B.358050

This expenditure was made for promotion of the Restore America's Voice PAC, its mission and to raise funds to support this mission. No portion of this expenditure was made on behalf of, or in opposition to, any specifically identified Federal candidate. This activity did not 'expressly advocate the election or defeat of any Federal candidate'.



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 17 OF 17

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**RESTORE AMERICA'S VOICE PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Bryan Cave LLP**Nature of Debt (Purpose):  
Legal Fees

Mailing Address 1155 F Street

City State

Zip Code

Washington

DC

20004

Outstanding Balance Beginning This Period

8466.13

Transaction ID : SD10.10306

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8466.13

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Restore America's Voice Management, LLC**Nature of Debt (Purpose):  
Management Fees

Mailing Address 71 McMurray Road Suite 104

City State

Zip Code

Pittsburgh

PA

15241

Outstanding Balance Beginning This Period

12788.28

Transaction ID : SD10.10226

Amount Incurred This Period

0.00

Payment This Period

9000.00

Outstanding Balance at Close of This Period

3788.28

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

12254.41

2) **TOTALS** This Period (last page this line number only)..... ►

12254.41

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

12254.41